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*Reports of States and yearly and monthly reports of cities.*

NEW JERSEY.—*Paterson*.—Month of September, 1898. Estimated population, 112,712. Total number of deaths, 174, including diphtheria, 5; enteric fever, 5; whooping cough, 8, and 17 from phthisis pulmonalis.

NEW YORK.—Reports to the State board of health, Albany, for the month of September, 1898, from 168 cities, towns, and villages, show a total of 11,481 deaths, including diphtheria, 135; enteric fever, 333; measles, 20; scarlet fever, 26; whooping cough, 120, and 1,076 from phthisis pulmonalis. The Monthly Bulletin says:

The total reported mortality for the month is 11,481, which is an increase of 180 over that of August, the daily average being 382 against 365. Customarily the number of deaths is less instead of greater. The increase is in diseases of the respiratory, circulatory, and nervous systems, and in deaths from violence; also, in typhoid fever and malarial diseases, diarrheal diseases having decreased by about 500 deaths. In the Maritime and Hudson Valley districts there were fewer deaths than in August; in all the other districts there is a reported increase. Compared with September, 1897, there is an increase in the total mortality by 2,000 deaths, the increase being in all the sanitary districts, and showing itself, among zymotic diseases, in typhoid fever, malarial diseases, whooping cough, and diarrhea, and among local diseases in those of the digestive and nervous systems, also in deaths from violence, and from unclassified diseases. The increase is also about 2,000 above the average for this month for the past ten years. The infant mortality is 500 less than in August, but is very much above the average for the month. Zymotic diseases caused 23 per cent of the total mortality, against 25.5 in August, and 19 in last September. Diarrheal diseases caused nearly 500 fewer deaths than in August, but 600 more than the average for the month; this increase is in all the sanitary districts, but chiefly in those having large rural population; the customary increase in diarrheal mortality in the early fall in the country, in contrast with its incidence in the early summer in the cities, being more marked than usual. Typhoid fever has a larger general prevalence than usual, 333 deaths, being double that of last September, and the increase is in all parts of the State, there being nowhere a special epidemic. Malarial diseases have a large increase in the Maritime district. Scarlet fever and measles have little prevalence, and diphtheria continues to cause but few deaths. Smallpox, in the very mild form previously reported, has been detected at Dunkirk, Genesee, Conesus, Elmira, McLean, and Machias since last month. The origin has apparently been from cases unrecognized because of its mildness in this and adjoining States, which report a similar prevalence to our own. An inspector from this board has been detailed for the exclusive duty of finding and suppressing it. The average temperature for the month was 2.5° above the average; the relative humidity was 75 per cent; southwesterly winds prevailing of moderate velocity; there were 15 clear days on an average for the month, and but 6 cloudy; the rainfall was 3 inches or nearly normal. Ninety-six deaths returned from Montauk Point Hospital (46 from typhoid fever, 23 from malaria, and 17 from dysentery) are not included in this report.

OHIO.—Reports to the State board of health during the five weeks ended October 1, 1898, from 54 localities, having an aggregate population of 1,149,773, show 27 deaths from diphtheria, 35 from enteric fever, 2 from measles, 3 from scarlet fever, and 1 from whooping cough.

#### THE SMALLPOX SITUATION IN OHIO.

At a meeting of the State board of health, held October 12, 1898, the secretary, in his quarterly report, presented the following account of outbreaks of smallpox in Ohio, which have occurred since the Put-in-Bay outbreak mentioned in the last number of the Bulletin :

Early in September, and at different times, 3 cases of smallpox were reported at Cincinnati. The origin of the disease could not be learned. The patients were removed to the branch hospital, and no other cases were reported there.

On September 20 I was summoned to Dayton, by telegram from the health officer, to see a case of smallpox. The patient was a servant in a family living in the central part of the city. The patient was in the first day of the eruption, but the disease was declared smallpox, and she was at once removed to the smallpox hospital. The origin was not then known, although it was learned that the patient had visited Wapakoneta two weeks before. Smallpox was not then known to exist in Wapakoneta. There has been no spread of the disease at Dayton.

On September 22 a case of smallpox was reported in Sandusky. The patient had come from Hotel Victory, Put-in-Bay, but seven weeks before being taken ill. Quarantine and vaccination of exposed persons prevented extension of the disease.

On September 26 the health officer of Oberlin reported a case of smallpox by telegram. In a letter following he stated that the patient was a traveling man for a grocery house in Toledo. The man came to Oberlin September 21, sick at the time, and his disease was diagnosed smallpox on the 26th. Proper precautions were taken and the disease did not spread. Origin unknown.